# FORM D

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

1860	OMB A	APPROVAL		
STATES	OMB Number:	3235-00		

3235-0076 April 30, 2008 Expires:

Estimated average burden

16.00 hours per response:



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

FORM D

SEC USE ONLY							
Prefix Serial							
	1						
_	DATE	RECEIVED					

		1 1. 1
Name of Offering (☐ check if this is an amendm	• • • • • • • • • • • • • • • • • • • •	
	LLC: Units of Limited Liability Company Inte	
Filing Under (Check box(es) that apply):	Rule 504 🔲 Rule 505 🗹 Rule 506 🛭	Section 4(6) ULPROCESSED
Type of Filing: ☐ New Filing ☐ Amenda	nent	
18 - The second of the Park of the second of	A. BASIC IDENTIFICATION DATA	CED 2 5 2007
1. Enter the information requested about the issu	ner	3Er 2 3 2007
Name of Issuer ( check if this is an amendment	ent and name has changed, and indicate change.)	-THOMSON
Goldman Sachs Hedge Fund Partners III,	LLC	FINANCIAL
Address of Executive Offices (No	imber and Street, City, State, Zip Code)	Telephone Number (including Area Code)
c/o Goldman Sachs Hedge Fund Strategies Jersey 08540	LLC, 701 Mount Lucas Road, Princeton, New	(609) 497-5500
Address of Principal Business Operations (if different from Executive Offices)	Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
To operate as a private investment fund.		RECEIVED
Type of Business Organization		_ < SEP 1 0 2007 >>
☐ corporation	☐ limited partnership, already formed	other (please specify):
□ business trust	☐ limited partnership, to be formed	Limited Liability Company
Artist a Paint of Data Classical Company	Month Year	✓ 200 es
Actual or Estimated Date of Incorporation or Org	anization: U 4 U 4	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service abbreviat State: CN for Canada; FN for other foreign juri	

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Check Box(es) that Apply: ☑ Promoter Managing Partner Full Name (Last name first, if individual) Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member) Business or Residence Address (Number and Street, City, State, Zip Code) 701 Mount Lucas Road, Princeton, New Jersey 08540 General and or Promoter : D. Beneficial Owner D. Executive Officer D. Director\* Check Box(es) that Apply: Managing Partner \*of the Issuer's Managing Member; Full Name (Last name first, if individual) Barbetta, Jennifer Business or Residence Address · (Number and Street, City, State, Zip Code) c/o Goldman Sachs Hedge Fund Strategies LLC, 32 Old Slip, New York, New York, 10005 ☐ Beneficial Owner ☐ Executive Officer Director\* General and/or ☐ Promoter Check Box(es) that Apply: \*of the Issuer's Managing Member Managing Partner Full Name (Last name first, if individual) Clark, Kent A. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 General and/or ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director\* ☐ Check Box(es) that Apply: Managing Partner \*of the Issuer's Managing Member Full Name (Last name first, if individual) , Lawson, Hugh J. 🍇 🦠 Business or Residence Address (Number and Street, City, State, Zip Code) c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004 Beneficial Owner Executive Officer Director General and/or ☐ Promoter ☐ Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) Business or Residence Address Director General and/or Check Box(es) that Apply: □ Promoter ☐ • Beneficial Owner Executive Officer Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) $\gamma_{ij}$ Business or Residence Address General and/or ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

"有基金		的"能量"的	不到的的是	B. IN	FORMAT	ION ABO	OUT OFF	ERING.	11 - 1(k - 3(k - 3+)	Haller S. P.	是有能量	· · · · · · · · · · · · · · · · · · ·
-	<del>-</del>										Yes	No
1. Has th	e issuer sol	d, or does th								•••••		Ø
			1	Answer also	in Append	ix, Column	2, if filing i	under ULO	Ε.			
2. What i	is the minin	num investn	nent that wil	l be accept	ed from any	individual	?				\$	0,000*
			Issuer, in i t ownership						nounts.		Yes ☑	No
comm If a pe or stat	ission or sir rson to be l es, list the r	nilar remun isted is an a name of the	eration for s ssociated pe	solicitation erson or age ealer. If me	of purchase int of a brok ore than five	ers in connector or dealer ter or dealer te (5) person	ction with s registered s to be liste	ales of secu with the SE	ly or indire rities in the C and/or wi ated person	offering. th a state		
Full Name	(Last name	e first, if ind	lividual)									
Goldman.	Sachs & C	Co.										
			Number and	Street, Cit	y, State, Zip	Code)						
05 D	Canada Nino	. Vaula Na	Vl. 100	10.4								
	Street, Nev		w York 100 ealer	104		•	•			· -		·
	2000011110112											
States in V	Which Daves	n Listad Us	s Solicited	or Intends t	o Coligit Du	rohonoro						
			lividual Stat				*********		*****	,,	🗹 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	ssociated E	roker or De	aler		·							
States in V	Vhich Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers	-					
									•••••		🗆 Al	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	(WI)	[WY]	[PR]
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number and	Street, City	, State, Zip	Code)				•	·	
Name of A	ssociated B	roker or De	aler									
States in W	Vhich Perso	n Listed Ha	s Solicited	or Intends to	o Solicit Pu	rchasers						
									• • • • • • • • • • • • • • • • • • • •			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	{VT}	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

[TN] [TX] [UT] [VT] [VA] [WA] [WV] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AŅ	USE OF PROC	EEI	OS ALCONOMICS
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$	0	\$	0
	Equity (Shares)	_		\$	0
	☐ Common ☐ Preferred	_	•		
	Convertible Securities (including warrants)	\$	0	\$	0
	Partnership Interests			\$	0
	Other (Specify: Units of Limited Liability Company Interests)			\$	683,624,357
	Total	_			683,624,357
	Answer also in Appendix, Column 3, if filing under ULOE.	_	,	,	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	506	\$	683,624,357
	Non-accredited Investors	_	N/A	\$	N/A
	Total (for filings under Rule 504 only)	_	N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				D. II.
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A		N/A	\$	N/A
	Rule 504	_	N/A	\$	N/A
	Total	_	N/A	\$	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$.	0
	Duinting and Enganying Costs			¢	0

Sales Commissions (specify finders' fees separately).....

Other Expenses (identify)

277,363 0

0

0 277,363

1743	C. OFFERING PRICE; N	IUMBER OF INVESTORS, EXP	ENS	ES A	ND USE OF P	ROCE	EDS	
	<ul> <li>b. Enter the difference between the aggreg</li> <li>Question 1 and total expenses furnished difference is the "adjusted gross proceeds to</li> </ul>	in response to Part C - Question 4.a	. Thi	is		\$_		683,346,994
5.	Indicate below the amount of the adjusted g to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted gro to Part C - Question 4.b. above.	If the amount for any purpose is not be the left of the estimate. The total	cnowr of th	n, ie				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$_	0	_ 🗆	\$_	0
	Purchase of real estate	***************************************		\$_	0	_ 🗆	\$_	0
	Purchase, rental or leasing and installation of	of machinery and equipment		<b>s</b> _	0		\$_	0
	Construction or leasing of plant buildings ar	nd facilities		\$_	0		<b>s</b> _	0
	Acquisition of other businesses (including this offering that may be used in exchan another issuer pursuant to a merger)	ge for the assets or securities of		\$	0	0	\$	0
	Repayment of indebtedness			\$ - \$	0		* - \$	0
	• •			-		_	\$ - \$	0
	Working capital			<b>\$</b> _	0	_ 0	3 - S	V
	Other (specify): Investment Capital		0	\$	0	<u>87</u> 1	3	
				_		_	-	683,346,994
	Column Totals			\$	0	☑	\$	
				_		-	_	683,346,994
	Total Payments Listed (column totals added	)	•••••		☑ \$	683,3	46,99	4
- *	· · · · · · · · · · · · · · · · · · ·	D. FEDERAL SIGNATUL	RE	· .		4		e e e e e e e e e e e e e e e e e e e
fc	he issuer has duly caused this notice to be ollowing signature constitutes an undertaking f its staff, the information furnished by the iss	by the issuer to furnish to the U.S. Se	ecuriti	ies an	d Exchange Comi	mission,	upon	r Rule 505, the written request
Issu	er (Print or Type)	Signature	<del></del>		Date	,		-
Gol LL	ldman Sachs Hedge Fund Partners III, C	200 m			September //,	2007		
_	ne of Signer (Print or Type)	Title of Signer (Print or Type)						
Kat	thryn Pruess	Vice President of the Issuer's Mana	ging i	Mem	ber			

# **ATTENTION**

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).